

PRINTED: 07/10/2008
FORM APPROVED

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 09G219	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 06/25/2008
NAME OF PROVIDER OR SUPPLIER METRO HOMES, INC		STREET ADDRESS, CITY, STATE, ZIP CODE 615 55TH STREET, NE WASHINGTON, DC 20019		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
I 000	INITIAL COMMENTS A initial licensure survey was conducted on June 25 2008. The findings of the survey were based on observations at the group home and interviews with the management staff in the residence and the review of the administrative records.	I 000		
I 052	3502.10 MEAL SERVICE / DINING AREAS Each GHMRP shall equip dining areas with tables, chairs, eating utensils, and dishes designed to meet the developmental needs of each resident. This Statute is not met as evidenced by: Based on observation and interview the facility failed to facilitate a client's needs with regards to eating meals at the dinner table. The finding includes: On June 25, 2008 observation of the dining room area revealed that the facility's management failed to purchase a dining room table and chairs for the client's use during meals. According to the CEO, the dining room furniture will be delivered in a couple of days. Note: A post survey visit was conducted on June 27, 2007 to confirm that dining room furniture had been delivered to the facility. There was no evidence that dining room table and chairs had not been delivered for the residents to use.	I 052	I 052 The facility has acquired the dining table with 6 chairs.	2008 JUL 15 P 4:46 RECEIVED DEPT OF HEALTH HEALTH REGULATION ADMINISTRATION 6/30/08
I 082	3503.10 BEDROOMS AND BATHROOMS Each bathroom that is used by residents shall be equipped with toilet tissue, a paper towel and cup	I 082		

Health Regulation Administration

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

STATE FORM

6596

91YT11

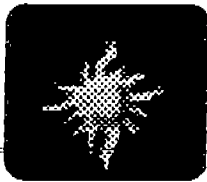
(X8) DATE

7/14/08

If continuation sheet 1 of 3

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I 082	Continued From page 1 dispenser, soap for hand washing, a mirror and adequate lighting. This Statute is not met as evidenced by: Based on observations and interview at the GHMRP failed properly equip each bathroom with the appropriate items to meet each residents need. The findings include: During the environmental walk-through on June 27, 2006 at approximately 2:00 PM revealed the following: 1. Bathroom #1 did not have any soap for hand washing, paper towels, cups and cup dispenser. 2. Bathroom #2 did not have any soap for hand washing, paper towels, cups and cup dispenser.	I 082	I 082 All bathrooms have been equipped with paper towels, , toilet paper and cups with cup dispenser.	6/30/08
I 090	3504.1 HOUSEKEEPING The interior and exterior of each GHMRP shall be maintained in a safe, clean, orderly, attractive, and sanitary manner and be free of accumulations of dirt, rubbish, and objectionable odors. This Statute is not met as evidenced by: Based on observation, the GHMRP failed to ensure the interior and exterior of the GHMRP was maintained in a safe, clean, orderly, attractive, and sanitary manner and be free of accumulations of dirt, rubbish, and objectionable odors. The findings include:	I 090		



METRO HOMES, INC.

6856 Eastern Avenue, NW., Suite 376
Washington, D.C. 20012

TEL: (202) 829-1707

Fax: (202) 829-0616

Email: NGatehomes@aol.com

METRO WASTE
8215 Grey Eagle Drive
Upper Marlboro, MD 20772
Attn: Carlette
Fax: 301-669-1829

July 2, 2008

Dear Carlette,

As per our conversation today July 2, 2008, I am respectfully requesting you to add our new house to our Metro Homes, Inc. account. Our new home is located at 615 55th Street NE Washington, DC 20019.

We would like to have three (3) 95 gallon Totters delivered to the property and put on the schedule for weekly trash pick up. It is to my understanding that the next scheduled day of trash pick up in that area would be Monday, I am requesting that you schedule us for a emergency trash pick up as soon as you can.

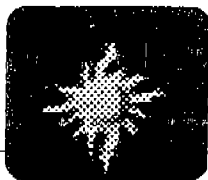
Thank you in advance for your help in this matter. I look forward to hearing from you to arrange the scheduled date and time of the emergency pick up at the 615 location.

Sincerely,

Jackie Ugo
202-829-1707 ext 10



METRO HOMES, INC.



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6856 Eastern Avenue, NW., Suite 376

Washington, D.C. 20012

TEL: (202) 829-1707

Fax: (202) 829-0616

Email: NGatehomes@aol.com

July 15, 2008

Pat VanBuren
Department of Health and Human Services
Intermediate Care Facilities Division
825 North Capitol Street NE 2nd Floor
Washington, DC 20002

Dear Ms. VanBuren,

Attached you will find our plan of corrections for 615 55th Street NE Washington, DC 20019 (Juliet House). If any other additional information is needed please contact me at the above mentioned number.

Sincerely,

Susan Sloan
Vice President of Operations

cc: Mark Clark, Quality Assurance Compliance Specialist
Shelia Pannell, Supervisor DOH
Sharon Mebane, DOH



METRO HOMES, INC.